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SCHWABE, WILLIAMSON & WYATT PACWEST CENTER, SUITE 1900 1211 S.W. FIFTH AVE. PORTLAND, OR 97204

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Heather L. Adamson	(Depositor's name)	
/Heather L. Adamson/	(Signature)	
10/1//000/	(Deta)	

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO

10/663,485	09/15/2003	Takashi Kumamoto			109263-131564	2427	
TITLE OF INVENTION	: MICROELECTRONIC	PACKAGE ARRAY					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/14/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS	1			
NADA	V, ORI	2811	257-686000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			For printing on the patent front page, list     (1) the names of up to 3 registered patent attorneys     ISCHWABE, WILLIAMSON				
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			<ol><li>the names of up to or agents OR, alternative</li></ol>	3 registered patent atto rely,	meys SCHWABE	WILLIAMSON	
			(2) the name of a single firm (having as a member a 2 & WYATT, P.C.				
PTO/SB/47: Rev 03-0	lication (or "Fec Address 2 or more recent) attach	"Indication form icd. Use of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
Number is required.							
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PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Intel Corporation Santa Clara, CA							
Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual Corporation or other private group entity Government							
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
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a. Applicant claim	s SMALL ENTITY state	is. See 37 CFR 1.27.	b. Applicant is no long	ger claiming SMALL El	TITY status. Sec 37 CFI	R 1.27(g)(2).	
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Authorized Signature	/James J. Na	miki/		Date10/16/	2006		
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